CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT FT. WORTH, TX

CITY SECRETARY

FORM C/OH **COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 Total				iled:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR Salva NICKNAME LAST LAST ESPINA		OFFICE Date Received	USEONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #; 1205 N. Mu.N F. Worth, T AREA CODE PHONE NUMBER		PECEL IN 152	ME WORTH
OFFICEHOLDER PHONE	(817) 624-335	2		or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Elizybe NICKNAME LAST	SUFFIX	Receipt # Date Processed	Amount \$
v .	Hurris.	Espino	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL 1 & O S M, Mo P1. Worth, T	in St.	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (817) 624-335	EXTENSION 5 Q		·
9 REPORT TYPE	January 15 30th day before elec		15th day afte treasurer app (Officeholder	pointment
IO PERIOD COVERED	O) / O I / L	THROUGH 06	Day Year 30 / 16	
1 ELECTION	Month Day Year Primary General	ELECTION TYPE Runoff Other Description Special		
2 OFFICE	Fort Worth City Council-District	13 OFFICE SOUGHT (if known)		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	ider "S	a) 1 Espino	ler ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE COMMITTEE NAME			
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$		\$	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			
	4. TOTAL	POLITICAL EXPENDITURES	\$ 3, 150.62	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL EXPENDITURES \$ 3, 150.62 5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 9,501.59			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$			
18 AFFIDAVIT				
SANDY OLIVA Notary Public State of Texas ID # 125387516 Comm. Expires 9/13/2016 SANDY OLIVA Notary Public State of Texas ID # 125387516 Comm. Expires 9/13/2016				
Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP / SEALABOVE				
Sworn to and subscribed before me, by the said				
day of, 20, to certify which, witness my hand and seal of office.				
Saudy Ochive SANDY OLIVA Notary Public				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME 20 Filer ID (Ethics Co	ommission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,150.62
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense
Contributions/Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District
Travel Out Of District

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services S The Instruction Guide explains h	Salaries/Wages/Contract Labor Other (enter a category not listed above) how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Salvado, 'Sal	3 Filer ID (Ethics Commission Filers)		
4 Date 1-20-16	Fort Worth His	spenic Chamber of Commerce		
6 Amount (\$)	7 Payee address; City; State; Zip Code 1327 N. Mu. St.			
\$ 610.00	Ft. Worm, TX	76164		
8	(a) Category (See Categories listed at the top of this sched	, , , , ,		
PURPOSE OF EXPENDITURE	Contribution	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
1-27-16	Muevo Leon			
Amount (\$)	Payee address; City; State; Zip C	Code Ave		
\$ 690.62	1547 Ellis F). Worth,	TX 76164		
	Category (See Categories listed at the top of this sched			
PURPOSE OF		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
EXPENDITURE	Event Expense	8		
	tood beverage			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
2-16-16		mic Chamber of Commerce		
Amount (\$)	Payee address; City; State; Zip C			
\$ 250.00	1327 N. Main	X 76164		
	Category (See Categories listed at the top of this schedu			
PURPOSE OF		Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Contr. bution	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Ma

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Candidate/Officeholder/Politic	1 ming	Expense Travel Out Of District Wages/Contract Labor Other (enter a category not listed above)		
Credit Card Payment	The Instruction Guide explains how to	•		
1 Total pages Schedule F1:	Salvador "Sal" [3 Filer ID (Ethics Commission Filers)		
4 Date 3 -4-16	5 Payenname Garcia	Campaign		
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$ 300.00	Fl. Worth, TX 76133			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF		Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Contribution	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
3-14-16	Ocampo Law	Firm		
Amount (\$)	Payee address; City; State; Zip Code 307 W. 7 5 5	H 1225		
41 000 00		·		
7),000.00	Ft. Warty T	×76/02		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	1.	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
EXPENDITURE	Cesal Services	Crieda ii Austini, 1A, dilicenducer living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
4-28-16	Kelly Allen Gr	ay Campaign		
Amount (\$)	Payee address; City: State; Zip Code	J		
\$300.00	Ft. Worth, TX	76111		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	- · ·	Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Contribution	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDUL F AS NEEDED				